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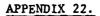
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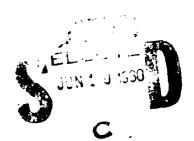
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OTOLARYNGOLOGY TECHNICIAN

APPLICATION OF A SYSTEM APPROACH U.S. NAVY MEDICAL DEPARTMENT EDUCATION AND TRAINING PROGRAMS FINAL REPORT



Prepared under Contract to OFFICE OF NAVAL RESEARCH U.S. DEPARTMENT OF THE NAVY

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Bureau of Medicine and Surgery (Code 71G)

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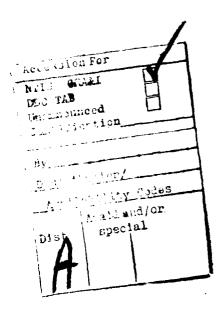
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currently designated Navy enlisted occupations, 20 Naval Enlisted Classification Codes (NEC's) were computerized. A set of 16 groupings that cover all designated occupations was developed so as to enhance the effectiveness of professionals and sub-professionals alike.



FOREWORD

The project, "Application of a System Approach to the Navy Medical Department Education and Training Programs," was initiated in May of 1969 as a realistic, comprehensive response to certain objectives set forth in ADO 43-03X, and to memoranda from both the Secretary of Defense and the Assistant Secretary of Defense, Manpower and Reserve Affairs. The Secretary's concern was stated in his memorandum of 29 June 1965, "Innovation in Defense Training and Education." More specific concerns were stated in the Assistant Secretary's memorandum of 14 June 1968, "Application of a System Approach in the Development and Management of Training Courses." In this he called for "vigorous and imaginative effort," and an approach "characterized by an organized training program with precise goals and defined operational interrelation among instructional system components." He also noted, "Job analyses with task descriptions expressed in behavioristic terms are basic and essential to the development of precise training goals and learning objectives."

The Project

System survey and analysis was conducted relative to all factors affecting education and training programs. Subsequently, a job-analysis sub-system was defined and developed incorporating a series of task inventories "... expressed in behavioristic terms ..." These inventories enabled the gathering of job activity data from enlisted job incumbents, and data relating to task sharing and delegation from officers of the Medical, Nurse and Dental Corps. A data management sub-system was devised to process incumbent data, then carry out needed analyses. The development of initial competency curricula based upon job analysis was implemented to a level of methodology determination. These methods and curriculum materials constituted a third (instructional) sub-system.

Thus, as originally proposed, a system capability has been developed in fulfillment of expressed needs. The system, however, remains untested and unevaluated. ADO 43-03X called for feasibility test and cost-effectiveness determination. The project was designed to so comply. Test and evaluation through the process of implementation has not proved feasible in the Navy Medical Department within the duration of the project. As designed and developed the system does have "... precise goals and defined operational interrelation among instructional system components." The latter has been achieved in terms of a recommended career structure affording productive, rewarding manpower utilization which bridges manpower training and health care delivery functions.

Data Management Sub-System

Job analysis, involving the application of comprehensive task inventories to thousands of job incumbents, generates many millions of discrete bits of response data. They can be processed and manipulated only by high speed computer capability using rigorously designed specialty programs. In addition to numerical data base handling, there is the problem of rapidly and accurately manipulating a task statement data base exceeding ten thousand carefully phrased behavioral statements. Through the use of special programs, task inventories are prepared, printouts for special purposes are created following a job analysis application, access and retrieval of both data and tasks are efficiently and accurately carried out, and special data analyses conducted. The collective programs, techniques and procedures comprising this sub-system are referred to as the Navy Occupational Data Analysis Language (NODAL).

Job Analysis Sub-System

Some twenty task inventory booklets (and associated) response booklets) were the instruments used to obtain job incumbent response data for more than fifty occupations. An inventory booklet contains instructions, formatted questions concerning respondent information ("bio-data"), response dimension definitions, and a list of tasks which may vary in number from a few hundred to more than a thousand per occupational field.

By applying NODAL and its associated indexing techniques, it is possible to assemble modified or completely different inventories than those used in this research. Present inventories were applied about three years ago. While they have been rendered in operational format, they should not be reapplied until their task content is updated.

Response booklets were designed in OPSCAN mode for ease of recording and processing responses.

Overall job analysis objectives and a plan of administration were established prior to inventory preparation, including the setting of provisional sample target sizes. Since overall data attrition was forecast to approximate twenty percent, final sample and sub-sample sizes were adjusted accordingly. Stratified random sampling techniques were used. Variables selected (such as rating, NEC, environment) determined stratifications, together with sub-population sizes. About fifteen percent of large sub-populations were sought while a majority of all members of small sub-populations were sought.

Administration procedures were established with great care for every step of the data collecting process, and were coordinated with sampling and data analysis plans. Once set, the procedures were formalized as a protocol and followed rigorously.

Instructional Sub-System

Partial "competency curricula" have been composed as an integral sub-system bridging what is required as performance on the job with what is, accordingly, necessary instruction in the training process. Further, curriculum materials were developed to meet essential requirements for implementing the system so that the system could be tested and evaluated for cost effectiveness. However, due to the fact that test and evaluation was not feasible in the Navy Medical Department within the duration of the project, it was not possible to complete the development of the system through the test and evaluation phase. The inability to complete this phase also interrupted the planned process for fully developing the curricula; therefore, instead of completed curricula ready for use in the system, the curricula were partially developed to establish the necessary sub-system methodology. The competency curricula are based on tasks currently performed by job incumbents in 1971. (The currency of a given curriculum depends upon periodic analysis of incumbents' jobs, and its quality control resides in the evaluation of the performance competency of the program's graduates.)

A competency curriculum provides a planned course of instruction or training program made up of sequenced competency units which are, in turn, comprised of sequenced modules. These modules, emphasizing performance objectives, are the foundation of the curriculum.

A complete module would be comprised of seven parts: a cluster of related tasks; a performance objective; a list of knowledges and skills implied by the objective; a list of instructional strategies for presenting the knowledges and skills to the learner; an inventory of training aids for supporting the instructional strategies; a list of examination modes; and a statement of the required training time. In this project, curriculum materials have been developed to various levels of adequacy, and usually comprise only the first three parts; the latter four need to be prepared by the user.

The performance objective, which is the most crucial part of the module, is the basis for determining curriculum content. It is composed of five essential elements: the stimulus which initiates the behavior; the behavior; the conditions under which the behavior takes place; the criteria for evaluating the behavior; and the consequence or results of the behavior. A sixth element, namely next action, is not essential; however, it is intended to provide linkage for the next behavior.

Knowledges and skills listed in the module are those needed by the learner for meeting the requirements of the performance objective.

Instructional strategies, training aids, examination modes and training time have been specified only for the Basic Hospital Corps Curriculum. The strategies, aids and modes were selected on the basis of those considered to be most supportive in presenting the knowledges and skills so as to provide optimum learning effectiveness and training efficiency. The strategies extend from the classroom lecture as traditionally presented by a teacher to the more sophisticated mediated program for self-instruction. The training aids, like strategies, extend from the traditional references and handout material in the form of a student syllabus to mediated programs for selfinstruction supported by anatomical models. Examination modes extend from the traditional paper and pencil tests to proficiency evaluation of program graduates on the job, commonly known as feedback. Feedback is essential for determining learning effectiveness and for quality control of a training program. The kind of instructional strategies, training aids and examination modes utilized for training are limited only by such factors as staff capability and training budget.

The training time specified in the Basic Hospital Corps Curriculum is estimated, based upon essential knowledge and skills and program sequence.

The competency curriculum module, when complete, provides all of the requirements for training a learner to perform the tasks set forth in the module. A module may be used independently or related modules may be re-sequenced into modified competency units to provide training for a specific job segment.

Since the curricula are based upon tasks performed by job incumbents in 1971, current analysis of jobs needs to be accomplished using task inventories that have been updated to reflect changes in performed tasks. Subsequent to job analysis, a revision of the curricula should be accomplished to reflect task changes. When the foregoing are accomplished, then faculty and other staff members may be indoctrinated to the competency curricula and to their relationship to the education and training system.

In addition to the primary use for the systematic training of job incumbents, these curricula may be used to plan for new training programs, develop new curricula, and revise existing curricula; develop or modify performance standards; develop or modify proficiency examinations; define billets; credentialize training programs; counsel on careers; select students; and identify and select faculty.

The System

Three sub-systems, as described, comprise the proposed system for Education and Training Programs in the Navy Medical Department. This exploratory and advanced developmental research has established an overall methodology for improved education and training incorporating every possible means of providing bases for demonstrating feasibility and cost effectiveness. There remains only job analysis sub-system up-dating, instructional sub-system completion, and full system test and evaluation.

Acknowledgements

The authors wish to acknowledge the invaluable participation of the several thousands of Naval personnel who served as respondents in inventory application. The many military and civilian personnel who contributed to developmental efforts are cited by name in the Final Report.

The authors also wish to acknowledge former colleagues for singularly important contributions, namely, Elias H. Porter, Ph.D., Carole K. Kauffman, R.N., M.P.H., Mary Kay Munday, B.S.N., R.N., Gail Zarren, M.S.W., and Renee Schick, B.A.

Identity and acknowledgement of the project Advisory Group during the project's final year is recorded in the Final Report.

Lastly, the project could not have been commenced nor carried out without the vision, guidance and outstanding direction of Ouida C. Upchurch, Capt., NC, USN, Project Manager.

NAVY MEDICAL DEPARTMENT

TASK INVENTORY BOOKLET

OTOLARYNGOLOGY (HOSPITAL CORPS)

CONSTRAINTS AND ETHICAL USE

This task inventory was developed three years ago in a first-version key punch format for education and training research purposes.

The present "operational" format, using a mark-sense response booklet (Opscan), is recommended for future applications. The task and equipment statements comprising the bulk of the inventory are precisely the same (less duplicate entries) as in the original research tools but rearranged for Opscan mode. Biographical data questions have also been reformatted for Opscan (NEC codes should be updated).

The processing, administering and formatting of this inventory have thus been readied for operational application.

It is strongly recommended that this inventory be updated in its task and equipment statement sections before actual operational use. These reasons pertain:

- Changes in medical or related procedures or techniques
- Some tasks may violate current policy or be obsolete
- *Equipment changes may have occurred
- The objective of task comprehensiveness may change
- •Objectives may shift to embrace manpower utilization as well as education and training

In the latter regard, the present operational format includes a "time to perform" dimension (as well as frequency of performance and two additional optional blank response dimension fields). As a response dimension, "time to perform" has been validated within the context of inventories for professional personnel where the objectives embraced utilization (i.e., time associated with shared and delegable tasks). The original Enlisted inventory content was directed to education and training factors only. If "time to perform" is to be used operationally, each task and equipment statement should be examined by expert job incumbents to remove possible overlaps which could confound "time to perform" data. This review process would also serve other purposes cited above.

A general precaution is in order.

When task analysis inventories are poorly prepared, loosely administered, administered according to less than rigorous sampling, or are handled casually in processing or interpretation, they will inevitably produce poor or questionable data, at best. At worst, such practices will result in loss of money and time, and produce dangerous data. Inventories should be prepared, applied, processed and interpreted only by knowledgeable professional and technical personnel. As in the cases of ethically controlled behavior tests, inventories should not be casually copied or distributed, and should remain under the control of authorized, trained personnel. Factors effecting reliability and validity should be fully appreciated.

GENERAL INSTRUCTIONS

There are two parts to be completed for this survey:

Part I Career Background Information (answers to be recorded in this TASK BOOKLET)

Part II A List of Tasks (answers to be recorded on the accompanying RESPONSE BOOKLET)

B List of Instruments and
Equipment (answers to be
recorded on the accompanying
RESPONSE BOOKLET)

Each part is preceded by a set of instructions. Be sure to read them carefully before you start answering each part. All instructions are found on the tinted pages.

PLEASE USE ONLY NUMBER 2 LEAD PENCILS. ERASE ALL CHANGES CAREFULLY AND COMPLETELY. DO NOT PUT ANY MARKS OTHER THAN YOUR ANSWERS ON EACH RESPONSE PAGE.

DO NOT FOLD, WRINKLE, CREASE OR DETACH PAGES FROM EITHER TASK BOOKLET OR RESPONSE BOOKLET.

WHEN RECORDING YOUR ANSWERS YOU MAY WANT TO USE A RULER TO READ ACROSS ANSWER AND QUESTION COLUMNS.

WHEN YOU HAVE COMPLETED YOUR RESPONSES, PUT THE TASK INVENTORY BOOKLET AND THE RESPONSE BOOKLET IN THE ENCLOSED SELF-ADDRESSED ENVELOPE. SEAL AND RETURN TO THE OFFICER WHO GAVE YOU THIS PACKAGE. COMPLETED BOOKLETS SHOULD BE RETURNED WITHIN ONE WEEK OF RECEIPT.

Part I CAREER BACKGROUND INFORMATION Check that the Form and Serial Number in this box match those on the cover of this Booklet Please fill out completely Name of your Duty Station	(1)
City & State (if applicable)	
Your Name	
Social Security Number	(14)
NUMBER IN THE BLANKS PROVIDED. TWO BLANKS REQUIRE A AN	NTER ISWERS ERE
Q1. Select the number to indicate the Corps to Q1. which you belong:	(23)
 Dental Technician Hospital Corps 	
Q2. Indicate your military status: Q2.	_ (24)
1. USN 2. USNR	
Q3. Indicate your pay grade: Q3.	_ (25)
1. E1 6. E6 2. E2 7. E7 3. E3 8. E8 4. E4 9. E9 5. E5	
Q4. Indicate your total years of active duty in the Navy to date: (estimate to the nearest year)	(26)
 Less than 2 years 2 to 4 years 5 to 8 years More than 8 years 	

		ENTER ANSWERS HERE	·
Q5.	Select the number to indicate your present immediate supervisor:	Q5	(27)
	 Physician Dentist Nurse MSC Officer HM or DT Other (Specify) 		
Q6.	Select the number to indicate the average number of hours you work per week: (estimate to the nearest hour) 1. 35 to 40 hours	Q6	(28)
	 41 to 50 hours More than 50 hours 		
Q7.	Please give an estimate of the percent of time you spend on the following (write five percent as 05):	Q7.	
	 Inpatient care Outpatient care Teaching Administration Other (specify) 	3	(29) (31) (33) (35) (37)
Q8.	Assuming that most or all of the following factors are of importance to you, select the three which, if improved, would contribute most to your job satisfaction:	Q8	(39) (41) (43)
	Ol Salary and/or promotion opportunities O2 Retirement benefits O3 Housing O4 Educational advancement opportunities O5 Stability of tour of duty O6 Physical facilities and equipment O7 Administrative and clerical support O8 Work load		
	09 Personal career planning 10 Opportunity to attend professional meetings		

		ENTER ANSWERS HERE	
Q9.	Using the list on page <u>vii</u> specify your current NEC by writing the <u>last two digits</u> of the CODE.	Q9	(45)
Q10.	Select the number to indicate your years of experience corresponding to the NEC stated in Q9: (estimate to the nearest year)	Q10	(47)
	1. Less than 1 year 4. 6 to 10 years 2. 1 to 2 years 5. 11 to 15 years 3. 3 to 5 years 6. More than 15 years		
	If you have other NEC(s) in addition to the one specified in Q9, check page vii and indicate the last two digits of the CODE(s). If you have none, enter "99" in answer space for Q11 and Q12.	Q11a b	(48) (50)
Q12.	Select the number to indicate the years of experience you had in the NEC(s) stated in Qll (estimate to the nearest year).	Q12a b	(52) (53)
	1. Less than 1 year 4. 6 to 10 years 2. 1 to 2 years 5. 11 to 15 years 3. 3 to 5 years 6. More than 15 years		
Q13.	From the list below, write the two-digit CODE to indicate the specialty of the department in which you are currently functioning.	Q13	(54)
	CODE Ol Administration Ol Education Ol Education Ol Education Ol Education Ol Coronary Care Ol Dermatology Ol Medicine - OPD Ol Medicine - Wards Ol Obstetrics/Gynecology Ol Orthopedics Ol Orthopedics Ol Orthopedics Ol Otolaryngology Medical Laboratory Pediatrics Psychiatry Public Health Radiology General Surgery-Wards		

v

					ENTER ANSWER HERE	
Q14.	of wor		t wh	indicate the type wich you currently working for at	Q14	(56)
	2. 3. 4. 5. 6. 7. 8.	Aboard ship/s	ub, dron for e Co ands	mmands		
Q15.		icate the numb mally supervis		of people you	Q15	(57)
	1.		4.	6-10 11-20 over 20		
		,				
					-	•

MEDICAL/DENTAL NEC (NAVAL ENLISTED CODE) AND TITLE

0000 General Service, Hospital or Dental Corpsman 3371 Health Physics & Process Control Technician 3391 Nuclear Power Plant Operator 8402 Nuclear Submarine Medicine Technician 8403 Submarine Medicine Technician 8404 Medical Field Service Technician 8405 Advanced Hospital Corps Technician (Class B) 8406 Aviation Medicine Technician 8407 Nuclear Medicine Technician 8408 Cardiopulmonary Technician 8409 Aviation Physiology Technician 8412 Clinical Laboratory Assistant Technician 8413 Tissue Culture Technician 8414 Clinical Chemistry Technician 8415 Medical Technology Technician 8416 Radioactive Isotope Technician 8417 Clinical Laboratory Technician 8432 Preventive Medicine Technician 8433 Tissue Culture and Tissue Bank Technician 8442 Medical Administrative Technician 8452 X-ray Technician 8453 Electrocardiograph/Basal Metabolism Technician 8454 Electroencephalograph Technician 8462 Optician (General) Technician 8463 Optician Technician 8466 Physical and Occupational Technician 8472 Medical Photography Technician 8482 Pharmacy Technician 8483 Operating Room Technician 8484 Eye, Ear, Nose, & Throat Technician 8485 Neuropsychiatry Technician 8486 Urological Technician 8487 Occupational Therapy Technician 8488 Orthopedic Appliance Mechanic 8489 Orthopedic Cast Room Technician 8492 Special Operations Technician 8493 Medical Deep Sea Diving Technician 8494 Physical Therapy Technician 8495 Dermatology Technician 8496 - Embalming Technician 8497 Medical Illustration Technician 8498 Medical Equipment Repair Technician 8703 DT General, Advanced 8707 DT Field Service 8713 DT Clinical Laboratory 8714 DT Research Assistant 8722 DT Administrative 8732 Dr Repair 8752 DT Prosthetic, Basic 8753 DT Prosthetic, Advanced 8765 DT Maxillofacial Prosthetic

RESPONSE BOOKLET INSTRUCTIONS

- To complete Part II, you need this TASK BOOKLET and the accompanying RESPONSE BOOKLET. Record all your answers to Part II in the RESPONSE BOOKLET.
- All pages of the RESPONSE BOOKLET are machine readable. In order for responses to be properly read, please be sure to:
 - 1. Use a No. 2 pencil only
 - Carefully and completely shade the number corresponding to your answer under each column.
- Complete Page 00 of the RESPONSE BOOKLET first. Follow instructions given on the page. Fill in Line 1, and Boxes 2, 3, 4, and 5. Ignore all other boxes. BE SURE TO ENTER YOUR SOCIAL SECURITY NUMBER (WRITE DOWNWARD) IN THE BLANK SPACES IN BOX 3: then darkly shade the corresponding number on each line. An example of a completed Page 00 is shown on the next page (the handwritten notes in this example are for clarification only. Please do not make similar notes on your RESPONSE BOOKLET.)
- After completing Page 00, carefully read and follow instructions given on pages x through xiv.
- PLEASE HANDLE YOUR RESPONSE BOOKLET CAREFULLY. KEEP IT CLEAN AND AWAY FROM CHEMICALS. DO NOT DETACH, FOLD, WRINKLE OR CROSS OUT ANY PAGE.

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PART II

PART II A LIST OF TASKS

PART II B LIST OF INSTRUMENTS AND EQUIPMENT

HOW TO RESPOND TO TASK STATEMENTS AND INSTRUMENTS

Your responses to each statement should be marked on the corresponding page, column and item number in your RESPONSE BOOKLET.

Note that each page in your RESPONSE BOOKLET has two response blocks. The left-hand block (items 1-25) is for entering responses to statements printed on LEFT pages of this TASK BOOKLET; the right-hand block (items 26-50) is for the responses to statements printed on RIGHT pages. Make sure that your answers are recorded in the appropriate block on every page. DO NOT MAKE ANY MARKS OTHER THAN YOUR ANSWERS!

Each time you start a new page in your RESPONSE BOOKLET, check the page on your TASK BOOKLET. See that the numbers match; then mark the page number in "Box X" in the response page (see instructions at the top of response page.) This is necessary for computer processing.

Tear the Response Guide (p. xiii) at the perforation, and use the correct side to respond to each task or instrument found on the following white pages. Note the following detailed explanation of responses. Column A - (the responses to Column A differ for Part II A and Part II B, be sure to use the appropriate set of responses.)

Part II A

How often did you do this task within the last month? (If you were on leave, consider your immediate past working month.)

- 0 = Did not do
- 1 = Did less than 5 times
- 2 = Did 5 to 20 times
- 3 = Did 21 to 50 times
- 4 = Did 51 to 100 times
- 5 = Did more than 100 times

Part II B

How often did you use this instrument or piece of equipment within the last month? (If you were on leave, consider your immediate past working month.)

- 0 = Did not use
- 1 = Used less than 5 times
- 2 = Used 5-20 times
- 3 = Used 21-50 times
- 4 = Used 51-100 times
- 5 = Used more than 100 times

If answer in Column A is 0, go to the next statement. If answer is 1, 2, 3, 4 or 5, answer also Columns B, C & D.

Column B

Indicate the approximate time you spent on a <u>single</u> performance the last time you performed this task.

- 0 = less than one minute
- 1 = 1 to 4 minutes
- 2 = 5 to 10 minutes
- 3 = 11 to 20 minutes
- 4 = 21 to 30 minutes
- 5 = 31 to 60 minutes
- 6 = 1 to 2 hours
- 7 = more than 2 hours

Column C

Do you feel you need additional training to perform this task?

- 0 = No
- 1 = Yes

RESPONSE GUIDE

(DO NOT LOSE THIS TAB)

- LIST OF TASKS HOW TO RESPOND TO PART IIA

IF A = 1-5, ANSWER COLUMNS B, C & D ALSO. IF A = 0, GO TO NEXT STATEMENT: ANSWER COL. A FIRST.

single performance TIME CONSUMED FREQUENCY

TRAINING TO PER-FORM THIS TASK? NEED ADDITIONAL DO YOU FEEL YOU the last time

(Additional instructions will be given if this

OPTION

Ω

column is used)

0=NO 1=YES

0=LESS THAN 1 MINUTE

performed)

=11 TO 20 MINUTES 4=21 TO 30 MINUTES

2=5 TO 10 MINUTES 1=1 TO 4 MINUTES

MORE THAN 100 TIMES ESS THAN 5 TIMES TO 20 TIMES NOT DO LAST MONTH TO 100 TIMES TO 50 TIMES 1-DID 0=DID 2=DID 3-DID 5-DID 4-DID

7=MORE THAN 2 HOURS 5=31 TO 60 MINUTES 6=1 TO 2 HOURS

xiii

RESPONSE GUIDE

(DO NOT LOSE THIS TAB)

HOW TO RESPOND TO PART IIB - LIST OF INSTRUMENTS AND EQUIPMENT

ANSWER COL. A FIRST. IF A = 0, GO TO NEXT STATEMENT: IF A = 1-5, ANSWER COLUMNS B, C & D ALSO.

Q	OPTION (Additional instructions will be given if this column is used)	
U	DO YOU FEEL YOU NEED ADDITIONAL TRAINING TO PER-FORM THIS TASK?	0=NO 1=YES
B	TIME CONSUMED (last time used)	0=LESS THAN 1 MINUTE 1=1 TO 4 MINUTES 2=5 TO 10 MINUTES 3=11 TO 20 MINUTES 4=21 TO 30 MINUTES 5=31 TO 60 MINUTES 6=1 TO 2 HOURS 7=MORE THAN 2 HOURS
A	FREQUENCY	0=DID NOT USE LAST MONTH 1=USED LESS THAN 5 TIMES 2=USED 5 TO 20 TIMES 3=USED 21 TO 50 TIMES 4=USED 51 TO 100 TIMES 5=USED MORE THAN 100 TIMES

Part II A
LIST OF TASKS

LEFT PAGE	OTO (HUSP COPPS) TASK BOOKLET
I TASK NO.	I ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE OF I OF RESPONSE HODKLET
1	RECEIVE PATIENTS ON ARRIVAL, I.E. INTRODUCE SELF, OBTAIN PATIENT'S NAME
2	TEXPLAIN SCHEDULES TO PATIENTS/FAMILIES, ILEL. TIME TO AND FROM TOLEN, APPRINTED TO AND FROM TOLEN, TOLEN, TIME TO AND FROM TOLEN, TOLEN, TIME TO AND FROM TOLEN, TOLEN, TIME TO AND FROM TOLEN, TOLEN
3	INSTRUCT OR HELP PATIENT/FAMILY FILL OUT FORMS
	I IVERIFY IDENTIFICATION OF PATIENT, E.G. FOR TREATMENT, IMEDICATIONS, EXAMINATION
5	 REMOVE/SECURE/RETURN PATIENTS PERSONAL EFFECTS
	1 10BTAIN PRELIMINARY MEDICAL HISTORY, I.E. PAST/PRESENT 1COMPLAINTS, ALLERGIES, MEDICATIONS
7	1 10BTAIN PATIENT'S SOCIAL AND FAMILY HISTORY !
8	I ASSIST PATIENTS IN/OUT OF BED, EXAM OR O.R. TABLES I
9	I ASSIST PATIENT WITH BEDPANS/URINALS/CCMMODE CHAIRS
10	 ASSIST PATIENT TO STAND/WALK/DANGLE
11	I ASSIST PATIENT IN PUTTING ON CLOTHES
12	I ILOAD/UNLOAD PATIENTS FROM STRETCHERS (GURNEY) I
13	 LOAD/UNLOAD PATIENT FROM AMBULANCE
14	 POSITION/HOLD PATIENT FOR EXAMINATION, TREATMENT, SURGERY
15	 MOVE/POSITION COMATOSE/ANESTHEFIZED PATIENT
16	 STIMULATE/AROUSE PATIENT AFTER ANESTHESIA ,
17	 POSITION PATIENT WHO HAS SYMPTOMS OF SHOCK
18	 POSITION PATIENT WHO HAS DIFFICULTY BREATHING
19	 MOVE/POSITION PATIENT WITH SUSPECTED FRACTURES OF EXTREMITIES
	1 MOVE/POSITION PATIENT WITH SUSPECTED SPINAL FRACTURES OR CORD INJURIES
21	 MOVE/POSITION PATIENT WITH HEAD INJURIES
22	 MOVE/POSITION PATIENT WITH SUSPECTED INTERNAL INJURIES
23	 DRAPE/GOWN PATIENT FOR EXAMINATION/TREATMENT
24	 DRAPE/UNDRAPE PATIENT FOR SURGERY
25	
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GO TO RIGHT HAND PAGE

TASK NO	I ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE OL
	OF RESPONSE BOOKLET
26	REASSURF/CALM PATIENT BEFORE SURGERY
27	 TREASSURE/CALM APPREHENSIVE (ANXIOUS) PATIENT
28	1 IREASSURE APPREHENSIVE PARENTS OF PEDIATRIC PATIENT 1
29	 REASSURE/GALM CHILDREN FOR EXAMINATION OR TREATMENT
	! !RESTRAIN PATIENTS, E.G. LINEN-LEATHER STRAPS, POSIE BELT, !BLANKET WRAPS
31	
32	 TRESTRAIN/CONTROL PATIENT PHYSICALLY, E.G. ARM HOLD
33	 RESTRAIN/CONTROL CHILDREN FOR EXAMINATION/TREATMENT/TEST
-	I TEACH PATIENT/FAMILY SIDE EFFECTS OF MEDICATION, E.G. IDROWSINESS, URINE DISCOLORATION
	I IINFORM PATIENT/FAMILY OF SYMPTOMS OF INTOLERANCE/OVERDOSE TO IMEDICATION, E.G. BLEEDING GUMS, COMA
36	
37	I IANSWER PATIENT INQUIRIES REGARDING NONPRESCRIPTION DRUGS !
38	 EXPLAIN/ANSWER QUESTIONS ABOUT TREATMENT PROCEDURE VIA TELEPHONE
39	INFORM PATIENT OF PROCEDURES REQUIRED PRIOR TO/DURING EXAMINATION/TEST/TREATMENT
40	I TEXPLAIN/ANSWER PATIENT'S QUESTIONS REGARDING EXAMINATION/TEST/ TREATMENT PROCEDURES
41	! TEACH PATIENT SELF-ADMINISTRATION OF MEDICATIONS (OTHER THAN !INJECTIONS)
42	TEACH PATIENT/FAMILY NURSING CARE PROCEDURES, E.G. DRESSING ICHANGE, CAST CARE
43	 EXPLAIN/ANSWER QUESTIONS ABOUT DOCTOR'S INSTRUCTIONS TO PATIENT/ FAMILY
44	EXPLAIN/ANSWER PATIENT'S QUESTIONS REGARDING SYMPTOMS/DISEASE/ TREATMENT
45	INSTRUCT PARENTS ON CARE OF CHILDREN WITH COMMUNICABLE DISEASES, IE.G. MEASLES, MUMPS
46	! !INFORM PATIENT OF PROGRESS OF THERAPY !
47	REINFORCE PATIENT'S POSITIVE RESPONSE TO THERAPY
48	INFORM PATIENT/FAMILY WHERE TO OBTAIN MEDICAL SUPPLIES
49	INFORM PATIENT/FAMILY OF MILITARY SERVICES, E.G. NAVY RELIEF, VETERANS BENEFITS
50	

LEFT PAGE (DZ OTO (HOSP CORPS) TASK BOOKLET
I TASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 02 OF RESPONSE BOOKLET
1	PREPARE PATIENT PSYCHOLOGICALLY FOR LONG TERM TREATMENT
2	INTERVIEW/EVALUATE PATIENT/FAMILY FOR REFERRAL/CONSULT
	ELIGIT INFORMATION TO ASCERTAIN PATIENT'S UNDERSTANDING/ ACCEPTANCE OF ILLNESS/TREATMENT
	ASK PATIENT/CHECK CHART FOR CONTRAINDICATION FOR TREATMENT, PROSEDURE, TEST
	REVIEW WITH PATIENT PRINTED INSTRUCTIONS FOR EXAMINATION/THERAPY PROSEDURES
6	EXPLAIN MINOR SURGICAL PROCEDURE/OPERATION TO PATIENT/FAMILY
7	EXPLAIN MAJOR SURGICAL PROCEDURE/OPERATION TO PATIENT/FAMILY
	 EXPLAIN TO PATIENT/FAMILY POST-OP PROCEDURES/CARE FOR RADICAL SURGERY
	INSTRUCT PARENT IN POST-OP CARE OF CHILD WTIH POLYETHELENE TUBE IIN EAR
10	EXPLAIN AUDIOGRAM TEST PROCEDURES TO PATIENT
11	EXPLAIN X-RAY PROCEDURES TO PATIENT
12	EXPLAIN LUMBAR PUNCTURE PROCEDURES TO PATIENT
13	 MEASURE/WEIGH PATIENT OR PERSONNEL
14	CHECK CENTRAL VENOUS PRESSURE
15	TAKE BLOOD PRESSURE
16	CHECK RADIAL (WRIST) PULSE
17	CHECK FEMORAL PULSE FOR PRESENCE AND QUALITY
18	 DETERMINE APICAL PULSE RATE/RHYTHM WITH STETHESCOPE
19	CHECK PATIENTS TEMPERATURE
20	CHECK/COUNT RESPIRATIONS
	 PERFORM CIRCULATION CHECK, E.G. COLOR, PULSE, TEMPERATURE OF SKIN, CAPILLARY RETURN
	 PERFORM NEUROLOGICAL (CRANIE) CHECKS, E.G. PUPILS, VITAL SIGNS, PATIENT RESPONSE
23	 CHECK PATIENT FOR PROSTHESIS, E.G. EYE/TEETH/EXTREMITY
24	 CHECK PATIENT'S RESPONSE TO PAINFUL STIMULUS AND TEMPERATURE
25	 CHECK PATIENT'S RESPONSE TO TOUCH, PRESSURE, TEMPERATURE
·	1

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	DE THOSE GOVERNMENT OF THE PROPERTY OF THE PRO
	FINTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 02 OF RESPONSE BOOKLET
26	CHECK PATIENT'S SENSORY RESPONSES TO TASTE, SMELL
	OBSERVE/RECORD OR DESCRIBE CHARACTERISTICS OF DRAINAGE FROM INTERNAL BODY ORGANS
	OBSERVE/RECORD OR DESCRIBE CHARACTERISTICS OF DRAINAGE FROM INCISIONS/WOUNDS
29	OBSERVE PATIENT FOR SIGNS OF CHILLING
	OBSERVE FOR/REPORT OR DESCRIBE SYMPTOMS OF IRRITABILITY, RESTLESSNESS, APPREHENSION
31	OBSERVE/REPORT SYMPTOMS OF SIDE EFFECTS TO TREATMENT/MEDICATION
	OBSERVE/RECORD PATIENT'S PHYSICAL/EMOTIONAL RESPONSE TO TREATMENT/DIAGNOSTIC PROCEDURES
33	OBSERVE PATIENT FOR/REPORT AND DESCRIBE ABNORMAL RESPIRATIONS
34	 EVALUATE PATIENT'S COMPLAINTS OR SYMPTOMS OF PAIN
35	I IOBSERVE FOR/REPORT SYMPTOMS OF SHOCK
	SCREEN PATIENT VIA TELEPHONE TO DETERMINE NEED FOR MEDICAL ATTENTION
	SCREEN PATIENT ON ARRIVAL TO DETERMINE WHICH STAFF MEMBER PATIENT SHOULD SEE
38	ICHECK PUPIL REACTION TO LIGHT
	OBSERVE/RECORD OR DESCRIBE CHARACTERISTICS OF DRAINAGE FROM EYES/EARS
	OBSERVE FOR/DESCRIBE HEARING DISTURBANCES, E.G. RINGING, HEARING
41	EXAMINE EAR FOR EXCESS WAX
42	EXAMINE TYMPANIC MEMBRANE FOR REDNESS, SWELLING
43	EXAMINE TYMPANIC MEMBRANE FOR PERFORATION
	CHECK FOR EARDRUM PERFORATION BY POLITZERIZATION, I.E. EARDRUM
45	PERFORM CALORIC TEST (EAR)
46	RECORD PATIENT'S CALORIC TEST RESPONSE TIME
47	TEST HEARING WITH A TUNING FORK
48	TAKE BONE CONDUCTION AUDIOGRAM
49	TAKE AIR CONDUCTION AUDIOGRAM
50	! TAKE PSYCHOGALVANIC SKIN RESPONSE AUDIOGRAM (PGSR)
	i de la companya de

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LEFT PAGE	D3 OTO (HOSP CORPS) TASK BOOKLET
	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 03 OF RESPONSE BOOKLET
1	GIVE SPEECH DISCRIMINATION TEST USING RECORDED SOUND
2	GIVE SPEECH DISCRIMINATION TEST USING DWN MODULATED VOICE
3	PLAY RECORDS FOR SPEECH DISCRIMINATION TESTING
4	PERFORM STENGER TEST FOR HEARING LOSS .
5	PERFORM ALTERNATE BINEURAL LOUDNESS BALANCE (ABLB) TEST
6	PERFORM BEKESY AUDIOMETRY (BADGE TEST)
7	PERFORM SENSITIVITY SOUND INCREMENT (SISI) TEST
8	PERFORM TONE DECAY TEST
9	DBSERVE FOR EAR SQUEEZE
10	CHECK PATIENT'S AIRWAY FOR PATENCY/OBSTRUCTION
11	OBSERVE/RECORD OR DESCRIBE CHARACTERISTICS OF SPUTUM, MUCUS
12	EXAMINE MUCOUS MEMBRANES OF NOSE/THROAT FOR INFLAMMATION
13	MAKE PRELIMINARY DIAGNOSIS OF SINUSITIS
14	MAKE PRELIMINARY DIAGNOSIS OF EXTERNAL EAR INFECTION
15	MAKE PRELIMINARY DIAGNOSIS OF OTITIS MEDIA
16	I MAKE PRELIMINARY DIAGNOSIS OF RUPTURED EAR DRUM
17	 MAKE PRELIMINARY DIAGNOSIS OF TONSILLITIS
18	 GIVE TUBERCULIN PPD TEST
19	 READ TUBERCULIN TEST REACTION
20	 GIVE HISTOPLASMOSIS/COCCIDICMYCOSIS SKIN TEST
	 Check color of skin, e.g. cyanosis, blanching, jaundice, Mottling
22	 CHECK TEXTURE OF SKIN, E.G. DRY, DILY, SCALY
23	 CHECK TEMPERATURE OF SKIN
24	 Check patient for sweating/diaphoresis
25	 CHECK SKIN FOR AIR IN TISSUE (CREPITUS)

TASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 03
 	1 OF RESPONSE BOOKLET
26	[CHECK FOR EDEMA (SWELLING) OF EXTREMITIES, EYES
27	ICHECK DEGREE OF PITTING EDEMA, I.E. 15T-4TH DEGREE
28	TEXAMINE AND DESCRIBE CHARACTERISTICS OF HIVES, RASHES
29	I EXAMINE FOR SYMPTOMS OF EXTERNAL FUNGAL INFECTIONS, E.G. IRINGWORM
30	EXAMINE FOR PRESENCE OF/OR CONTACT WITH LICE, FLEAS, TICKS,
31	EXAMINE ANIMAL OR HUMAN BITES
32	TEXAMINE FOR SYMPTOMS OF SNAKE BITES
33	CHECK SKIN FOR ABNORMAL CONDITIONS, E.G. PRESSURE SORES, BRUISES, NEEDLE MARKS
34	OBSERVE FOR/REPORT SYMPTOMS OF CELLULITIS
35	IEXAMINE AND DESCRIBE BURNS, I. E. SOURCE, AREA, DEGREE
36	MAKE PRELIMINARY DIAGNOSIS OF FUNGAL SKIN INFECTION
37	POINT OUT POSSIBLE ABNORMALITIES ON X-RAY FILM TO DOCTOR
38	 MAKE ENTRIES ON NAVMED 6710/1 (NARCOTIC AND CONTROLLED DRUG ACCOUNT RECORD)
39	PREPARE STORAGE FOR SUPPLY OF NARCOTICS/CONTROLLED DRUGS

POUR/DRAW UP MEDICATIONS OTHER THAN NARCOTICS AND CONTROLLED DRUGS

46 MAKE ENTRIES INTO CONTROLLED DRUG/ALCOHOL LOG

TORDER STOCK MEDICATIONS FROM PHARMACY

TORDER DRUGS LISTED IN FEDERAL SUPPLY CATALOGUE

41

42

43

45

1 TANSHER PERSONNEL INQUIRIES REGARDING MIXING/ADMINISTERING DRUGS

48 ANSHER INQUIRIES REGARDING DRUG REACTION

9 IDISPOSE OF MEDICATIONS PREPARED BUT NOT ADMINISTERED

DISPOSE OF/RETURN MEDICATIONS/DRUGS WHOSE SHELF-LIFE HAS EXPIRED

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LEFT PAGE	04 OTO (HOSP CORPS) TASK BOOKLET
	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 04 OF RESPONSE BOOKLET
	DETERMINE WHETHER TO DESTROY OR TO RETURN PHARMACEUTICALS TO MANUFACTURER
2	DISPOSE/REPACK UNCLAIMED MEDICATIONS/DRUGS
	DETERMINE NEED FOR EMERGENCY EQUIPMENT/MEDICATION FOR POSSIBLE PATIENT USE
4	 DETERMINE MEDICATIONS AND SUPPLIES FOR DRUG KITS
5	 SAFEGUARD POISONS
6	1 ICHECK/COUNT NARCOTICS/CONTROLLED DRUGS I
	I IDO AN INVENTORY OF DRUGS OTHER THAN NARCOTICS AND CONTROLLED Idrugs
8	CLASSIFY AND STORE DRUGS
9	 IROTATE PHARMACEUTICAL STOCKS TO INSURE FRESHNESS AND POTENCY
10	I Icheck drugs for supply needs I
	 CHECK DRUGS FOR VISIBLE CONTAMINATION/DETERIORATION, E.G. CLDUDINESS, COLOR CHANGE
12	I IDETERMINE EXPIRATION DATE OF LOCALLY COMPOUNDED PHARMACEUTICALS
13	 NEGOTIATE WITH CIVILIAN SUPPLIERS REGARDING NEW DRUGS
_	1 INEGOTIATE WITH PHARMACEUTICAL COMPANY REPRESENTATIVES FOR FREE INTRODUCTORY SAMPLES
15	READ/USE PHARMACEUTICAL MANUALS, FORMULARY, POR
16	I CONVERT MEDICATION DOSAGE FROM CC TO MINIMS, GRAINS TO GRAM I
	I CONVERT COMMON WEIGHTS AND MEASJRES FROM ONE SYSTEM TO ANOTHER, IE.G. CC TO TSP, LBS TO KG
_	I ICONVERT SOLUTION CONCENTRATIONS FROM GM/MG % TO MEQ/L AND VICE IVERSA
	I ICONVERT PRESCRIBED DOSE INTO UNITS OF ADMINISTRATION, E.G. INUMBER OF CC, TABLETS
20	 DILUTE OR MIX POWDERED MEDICATIONS
21	 MAKE DILUTIONS OF MEDICINALS
22	I IPREPARE LOCAL ANESTHETIC SOLUTIONS FOR USE I
23	 PREPARE AND MAINTAIN ANTIDOTE SECTION/LOCKER
24	I IADD MEDICATION TO AND LABEL I.V. SOLUTIONS
25	 DETERMINE COMPATABILITIES OF I.V. SOLUTIONS AND ADDITIVES
	i de la companya de

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RIGHT PAGE	04 DTO (HOSP CORPS) TASK BOOKLET
I TASK NO.	1 ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 04 1 OF RESPONSE BOOKLET
26	STOCK ANESTHETIC CART
27	IISSUE FILLED PRESCRIPTIONS
28	I ISSUE NON-PRESCRIPTION MEDICATIONS E.G. ASPIRIN
29	DETERMINE SIMILARITIES BETWEEN PHARMACEUTICAL TRADE NAMES AND IGENERIC NAMES
30	ICHECK PRESCRIBED MEDICATIONS FOR INCOMPATIBILITIES OF ADMINISTRATION OR MIXING
31	CHECK ORDERED MEDICATIONS FOR OVER DOSAGE AND CONTRAINDICATIONS
32	INOTIFY DOCTOR OF ERRORS IN MEDICATION ORDERS
33	I
34	ILABEL MEDICINE GLASSES WITH NAME AND AMOUNT OF DRUG FOR STERILE IFIELD
35	ADMINISTER ORAL MEDICATION
36	ADMINISTER SUBLINGUAL/BUCCAL MEDICATION
37	TAPPLY TOPICAL SKIN/LIP MEDICATION, E.G. DINTMENT, POWDER
38	
39	APPLY TOPICAL ANESTHESIA
40	
41	ADMINISTER MEDICATION BY SUBCUTANEOUS INJECTION
42	ADMINISTER INTRADERMAL INJECTION
43	ADDMINISTER MEDICATION BY INTRAMUSCULAR INJECTION
44	 ADMINISTER MEDICATION TO EYE/EAR/NOSE
45	ADMINISTER CONTROLLED DRUGS
46	ADMINISTER NARCOTICS
47	START/HANG BLOOD TRANSFUSION
48	REGULATE BLOOD TRANSFUSION FLOW
49	ADMINISTER BLOOD EXPANDER OTHER THAN BLOOD, E.G. PLASMA, ALBUMIN
50	ADMINISTER I.V. MEDICATION DIRECTLY INTO VEIN
	:

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EFT PAGE	05 OTO (HOSP CORPS) TASK BOOKLET
	I ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 05 I OF RESPONSE BOOKLET
1	IINSTILL MEDICATION INTO TUBE, MACHINE, E.G. TRACH TUBE, CATHETERS, I.P.P.B. MACHINE
2	ADMINISTER I.V. MEDICATION VIA SOLUSET, PIGGY BACK, OR I.V. BOTTLE
3	ADMINISTER MEDICATION BY INJECTION INTO IV TUBING
4	TADMINISTER I.V. DOSE OF NON RADIOACTIVE TEST MATERIAL, E.G. BSP DYE, RADIOPAQUE DYE
5	ADD/CHANGE I.V. BOTTLE DURING CONTINUOUS INFUSION
6	I IRRIGATE I.V. TUBING
7	
8	
9	IDISCONTINUE I.V. THERAPY
10	I IADMINISTER INNOCULATIONS AND VACCINATIONS
11	TERMINATE INTRAVENOUS DYE FLOW AND REMOVE INJECTOR
12	PRESCRIBE LOZENGES, THROAT GARGLES, EXPECTORANTS
13	CHECK DRESSINGS, E.G. FOR CLEANLINESS
14	
15	REINFORCE DRESSINGS, 1.E. ADD DRESSINGS
16	APPLY WET COMPRESSES/SOAKS/PACKS
17	
18	 GIVE ICE PACK TREATMENT
19	I INCISE AND DRAIN SUPERFICIAL ABSCESS
20	START I.V. THERAPY VIA MEDICUT (ANGIOCATH, JELCO)
21	START [.V. THERAPY VIA NEEDLE/SCALP VEIN/BUTTERFLY
22	IGIVE PHISOHEX/BETADINE SCRUB TO PATIENTS
23	I ISHAVE AND SCRUB PATIENT FOR SURGERY OR DELIVERY OR TREATMENT OR IEXAMINATION
24	
25	IGROUND PATIENT, E.G. FOR ELECTRICAL CAUTERIZATION, IDEFIBRILLATON, EKG
	INCLIDATE PARTE DE LA COMPANION DE LA COMPANIO

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RIGHT PAGE	05	OTO	CHUSP	CORPSI	TASK	BOOKLET

TIGHT FAGE	yy did india contai than booker
	ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 05 OF RESPONSE BOOKLET
26	POSITION/HOLD RETRACTORS TO MAINTAIN OPEN INCISION
27	REMOVE FLUID FROM SURGICAL SITE WITH SPONGES OR SUCTION
	PREPARE AND POSITION PROSTHESIS/GRAFT TISSUE DURING SURGICAL PROCEDURE
29	REMOVE SUTURES
30	CUT SUTURES AT SURGICAL SITE
31	TIE SUTURES/LIGATURES FOR HEMOSTASIS
32	SUTURE SKIN
33	SUTURE FASCIA
34	SUTURE MUSCLE
35	SUTURE INTERCOSTAL TISSUE
36	SUTURE SUBCUTANEOUS TISSUE
37	SUTURE MUCOSAL TISSUE
38	SUTURE FACIAL LACERATIONS
39	CUT TISSUE AS DIRECTED BY SURGEON
40	MAKE INCISION FOR MINOR SURGERY
41	FIRST ASSIST DURING MAJOR SURGERY
	PERFORM SECONDARY CLOSURE OF WOUND, E.G. DEBRIDE, INSERT DRAIN.
43	GIVE PASSIVE STRETCH AGAINST CONTRACTURE
44	CLAMP BLOOD VESSELS
45	CONTROL MINOR BLEEDING, E.G. AFTER EXTRACTION OR INCISION
46	CONTROL BLEEDING BY APPLYING TOURNIQUETS
47	CONTROL BLEEDING BY APPLYING DIGITAL PRESSURE ON BLOOD VESSEL
48	CAUTERIZE BLEEDERS WITH ELECTRIC CAUTERY (BOVIE)
49	CONTROL BLEEDING BY PRESSURE DRESSING
	CAUTERIZE BLEEDERS WITH CHEMICAL, E.G. SILVER NITRATE STICK, POMDER
	TURN PAGE

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TASK NO.	1 ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 06 1 OF RESPONSE ROOKLET
1	ICLEAN WOUND, CUT, ABRASION
2	
3	I IPACK INCISION/WOUND/CAVITY I
4	I INSERT DRAIN/WOUND CATHETER, E. G. PENROSE, RUBBER BAND
5	I TIRRIGATE MOUND I
6	I IOBSERVE FOR/REPORT SYMPTOMS OF WOUND INFECTION
7	CHECK/EXAMINE INCISIONS/WOUNDS FOR PROGRESS OF HEALING
8	REMOVE SUPERFICIAL FOREIGN BODY FROM TISSUE
9	I TOBTAIN EQUIPMENT, MEDICATIONS, INSTRUMENTS P.R.N. FOR PERSONNEL PERFORMING STERILE PROCEDURE
10	OBTAIN PROSTHESIS FOR SURGICAL PROCEDURE, E.G. AORTIC GRAPH, PLATE, IMPLANT
11	I SET UP MAYO STAND WITH INSTRUMENTS 1
12	SET UP SURGICAL BACK TABLE WITH STERILE INSTRUMENTS/EQUIPMENT
13	ISET UP SUTURE BOOK/TOWEL
14	
15	
16	
17	ADJUST SURGICAL SPOT LIGHT
18	I IFLASH STERILIZE INSTRUMENTS I
19	COUNT NEEDLES/INSTRUMENTS PRE/POST SURGERY
20	COUNT SPONGES DURING/AFTER SURGICAL PROCEDURE
21	TOULECT, COUNT AND LAYOUT USED SPONGES FOR CALCULATING BLOUD ILOSS AND FOR SPONGE COUNT
22	THEIGH USED SPONGES FOR CALCULATING BLOOD LOSS
23	IPASS STERILE DRAPES TO SURGEON
24	
25	PASS STERILE MATERIALS, EQUIPMENT, MEDICATION, TO PERSONNEL PERFORMING STERILE PROCEDURE

RIGHT PAGE	06 OTO CHOSP CORPS) TASK BOOKLET	
	I ENTER RESPONSES TO STATEMENTS BELOW IN RIG I OF RESPONSE BOOKLET	HT SIDE OF PAGE 05
	IPASS STERILE ACCESSORIES, EQUIPMENT, E.G. T CIRCULATOR FOR CONNECTION	UBING, CORD TO
27	PASS CONTAMINATED MATERIAL TO CIRCULATOR	
28	1 IPASS SPECIMEN TO CIRCULATOR 1	
29	1 PMAINTAIN DRY STERILE FIELD DURING SURGERY !	
30	 SCRUB FOR SUPGERY/STERILE PROCEDURE	
31	I IGONN FOR STERILE PROCEDURE I	
32	 GLOVE FOR STERILE PROCEDURE 	
33	I TREPORT BREAK IN STERILE TECHNIQUE TO PERSON I	NEL
34	I IGOWN AND SLOVE PERSONNEL FOR STERILE PROCED I	UR E
35	1 ITIE UP SURGICAL GOWN FOR SCRUBBED PERSONNEL I	
36	! !REMOVE CONTAMINATED GLOVES FROM SURGICAL TE !	ΔМ
	! Supply physical comfort to surgical team, e Back	.G. WIPE BROW, RJB
38	! HOLD VIALS/AMPULES OF DRUGS FOR USE AND DRU STERILE PROCEDURE	G VERIFICATION DURING
39		SALINE
40	I TINCISION AND DRAINAGE I	SCRUB
41	! !INCISION AND DRAINAGE !	CIRCULATE
42	ISKIN GRAFTS	SCRUB
43	ISKIN GRAFTS	CIRCULATE
44	 HOMO GRAFTS -	SCRUB
45	HOMO GRAFTS	C IRCUL ATE
46	ISCAR REVISIONS	SCRUB
47	SCAR REVISIONS	CIRCULATE
48	 DERMABRASION 	SCRUB
49	 IDERMABRASION 	CIRCULATE
50	TREPAIR OF CLEFT LIP	SCRUB

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	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT OF RESPONSE BOOKLET	SIDE OF PAGE 07
1	REPAIR OF CLEFT LIP	CIRCULATE
2	l Trepair of Cleft Palate I	SCRUB
3	 REPAIR OF CLEFT PALATE 	CIRCULATE
4	I TREPAIR OF STRABISMUS I	CIRCULATE
5	 REPAIR OF ORBITAL FRACTURE, E.G. RIM 	SCRUB
6	 REPAIR OF ORBITAL FRACTURE, E.G. RIM 	CIRCULATE
7	I IPEPAIR OF BLOW OUT FRACTURE OF EYE ORBIT I	SCRUB
8	I TREPAIR OF BLOW OUT FRACTURE OF EYE ORBIT	CIRCULATE
9	 TONSILLECTOMY/ADENOIDECTOMY 	SCRJB
10	 TONSILLECTOMY/ADENOIDECTOMY 	CIRCULATE
11	 LARYNGEC TOMY 	SCRUB
12	I I LAR YNGEC TOMY I	CIRCULATE
13	I I MASTOIDECTOMY I	SCRUB
14	I MASTOLDECTOMY	CIRCULATE
15	I Itracheotomy, tracheostomy I	SCRUB
16	I ITRACHEOTΩMY, TRACHEOSTOMY I	CERCULATE
17	I IRADICAL NECK RESECTION I	SCRUB
18	1 Tradical Neck resection 1	CIRCULATE
19	SUBMUCOUS RESECTION	SCRUB
20	ISUBMUCTUS RESECTION	CIRCULATE
21	I INASAL POLYPECTOMY I	SCRUB
22	INASAL POLYPECTOMY	CIRCULATE
23	I STAPEDEC TOMY	SCRUB
24	I STAPEDEC TOMY	CIRCULATE
25	STAPES TYMPANOPLASTY	SCRUB

	FNTER RESPONSES TO STATEMENTS BELOW IT OF RESPONSE BOOKLET	
26	STAPES TYMPANOPLASTY	CIRCULATE
27	ISTAPES MOBILIZATION	SCRUB
28	STAPES MOBILIZATION	CIRCULATE
29	DESTRUCTIVE LABYRINTHOTOMY	SCRUB
30	I THE STRUCTIVE LABORINTHOTOMY	CIRCULATE
31	1 1()TOPLASTY	SCRUB
32	INTOPLASTY	CIRCULATE
33	IMYRINGOPLASTY	SCRUB
34	MYRINGOPLASTY	CIRCULATE
35	TOPEN REDUCTION OF NASAL FRACTURE	SCRUB
36	OPEN REDUCTION OF NASAL FRACTURE	CIRCULATE
37	REPAIR OF FRACTURED LARYNX	SCRUB
38	REPAIR OF FRACTURED LARYNX	CIRCULATE
39	RHINOPLASTY	SCRUB
40	RHINOPLASTY	CIRCULATE
41	CALDWELL LUC	SCRUB
42	CALDWELL LUC	CIRCULATE
43	I I IFRONTAL ŞINUS TREPHINE	CIRCULATE
44	 	SCRUB
45	 	CIRCULATE
46	 	SCRUB
47	 	CIRCULATE
48	 	SCRUB
	1	C TOCULATE
49	MYR I NGOTOMY	CIRCULATE

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I TASK NO.	I ENTER RESPONSES TO STATEMENTS BELOW IN LEFT I OF RESPONSE BOOKLET	STOF OF PAGE 08
l	SEPTOPLASTY	CIRCUL AT E
2	I TPAROTIDECTOMY f	SCRUB
3	 PAROTIDECTOMY 	CIRCULATE
4	I IFACIAL NERVE DECOMPRESSION I	SCRUA
5	! !FACIAL NERVE DECOMPRESSION !	CIRCULATE
6	 GLDSSECTOMY 	SCRUB
7	l Jolossectomy I	CIRCULATE
8	 TOPEN REDUCTION OF MANDIBLE 	SCRUB
9	 OPEN REDUCTION OF MANDIBLE 	CIRCULATE
10	 REMOVAL OF SALIVARY CALCULUS (STONE) 	SCRUB
11	 REMOVAL OF SALIVARY CALCULUS (STONE) 	CIRCULATE
12	 RANULA REPAIR 	SCRUB
13	I RANULA REPAIR	CIRCULATE
14	 IOPEN REDUCTION OF ZYGOMATIC ARCH 	EURDZ
15	I TOPEN REDUCTION OF ZYGOMATIC ARCH I	CIRCULATE
16	 THYROIDECTOMY 	SCRUB
17	 THYROIDECTOMY 	CIRCULATE
18	 EXCISE POLYP 	
19	 EXCISE SEBACEOUS CYST/LIPOMA 	
20	I IPERFORM WEDGE SECTION BIOPSY OF SKIN	
21	 GIVE SPECIAL SKIN/DECUBITUS CARE, E.G. APPLY DRESSINGS, IRRIGATE	MEDICATION,
22	 IRRIGATE ANTRAL SINUS 	
23	I IINSERT ANTERIOR NASAL PACKING I	
24	Í I IRRIGATE EARS Í	
25	 IREMOVE SUPERFICIAL MATERIAL FROM EAR CANAL 	
	1	

RIGHT PAGE	OB OTO (HOSP CORPS) TASK BOOKLET
	I ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE OB I OF RESPONSE BOOKLET
26	TREMOVE IMBEDIED FOREIGN BODY FROM FAR CANAL
27	1 FIRRIGATE MOUTH/ORAL CAVITY 1
28	1 GIVE THROAT ERREGAT!UN/CARGEE
29	I ISUCTION NASAL/ORAL PASSAGE
30	 SUCTION TRACHEA, I.E. DEEP ENDOTRACHEAL SUCTION
31	 INTUBATE PATIENT'S TRACHEA/LARYNX
32	 PERFORM TRACHEOTOMY/TRACHEOSTOMY
33	 INSERT NEEDLE INTO TRACHEA TO MAINTAIN AIRWAY
34	 INSERT N.G./LEVINE TUBE
35	 Insert Esophagoscope
	 GIVE TRACHEDTOMY CARE, E.G. REMOVE AND CLEAN INNER CANNULA, SUCTION, INFLATE/DEFLATE CUFF
37	 Change trachedtomy tube
38	 REMOVE SUPERFICIAL FOREIGN BODY FROM THROAT
39	 REMOVE EMBEDDED FOREIGN BODY FROM THROAT
40	 ASK/INSTRUCT PATIENT TO COLLECT SPECIMEN
	I ICHECK WITH PATIENT TO ENSURE THAT HE HAS COLLECTED SPECIMEN AS INSTRUCTED
42	 COLLECT UNORDERED SPECIMENS FOR NURSE/DOCTOR TO EVALUATE
43	 ASCERTAIN IF PATIENT HAS BEEN PREPPED FOR TEST/TREATMENT PROCEDURE
44	 LABEL/ACCESSION SPECIMEN CONTAINERS, E.G. TUBES, SLIDES
45	 ASSIST PATIENT IN COLLECTING CLEAN CATCH URINE
46	 PREPARE, LABEL AND SEND CULTURE SPECIMENS TO LABORATORY
47	 PREPARE, LABEL AND SEND BIOPSY SPECIMENS TO LABORATORY
48	PREPARE, LABEL AND SEND ROUTINE SPECIMENS E.G. URINE, BLOOD TO LABORATORY
49	 PREPARE/PRESERVE ROUTINE (NON-TISSUE) LAB SPECIMEN FOR SHIPMENT
50	 TAKE NASAL/EAR/THROAT SPECIMEN BY STERILE SWAB
,	TURN PAGE

LEFT PAGE O	9 OTO (HOSP CORPS) TASK BOOKLET
	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 09 OF RESPONSE BOOKLET
	COLLECT THROAT/NOSE/EAR CAVITY SECRETIONS/SPECIMEN BY SUCTION TRAP
2	COLLECT BLOOD BY VENIPUNCTURE
	COLLECT CAPILLARY BLOOD SAMPLE, 1.E. FROM FINGER TIP, TOE OR EAR LOBE
4	COLLECT URINE SPECIMEN FROM INFANTS
5	TAKE WOUND SPECIMEN FROM PATIENT
6	CHECK BLOOD HEMATOCRIT
	MEASURE/DILUTE/PRESERVE LAB SPECIMEN E.G. URINE, BLOOD FOR SUBSEQUENT TESTING
8	CHECK SPECIFIC GRAVITY OF URINE
9	CHECK URINE PH BY PAPER STRIP/DIP STIK
10	CHECK URINE SUGAR BY DIP STIK/CLINITEST
11	 CHECK URINE PROTEIN BY DIP STIK
12	 CHECK URINE FOR ACETONE/KETONE BODIES
13	 PREPARE SMEARS FOR MICROSCOPIC ANALYSIS
14	 SET UP AND MAINTAIN STAINING PROCEDURE
15	 CONVERT CENTIGRADE TEMPERATURE TO FAHRENHEIT OR VICE VERSA
• •	 READ EQUIPMENT MANUALS FOR OPERATION AND MAINTENANCE OF EQUIPMENT
17	INITIATE TREATMENT PROCEDURES IN THE ABSENCE OF A DOCTOR
18	I PRECOMMEND NEED FOR PARAMEDICAL CONSULT OR REFERRAL, E.G. SOCIAL IWORKER, O.T., P.T.
19	 RECOMMEND NEED FOR SPECIALTY CONSULT/REFERRAL
20	I IFOLLOW UP PATIENT TO DETERMINE IF NEEDED SERVICES WERE OBTAINED
21	IDETERMINE NEED TO NOTIFY DOCTOR/NURSE OF PATIENT'S CONDITION
22	TREFER PATIENT TO DOCTOR FOR TREATMENT
23	 REFER PATIENT TO NURSE FOR TREATMENT
24	I INFORM DOCTOR/NURSE OF PATIENT'S CONDITION, E.G. DESCRIPTION OF INJURY, SYMPIOMS, RESPONSE
25	INFORM DOCTOR OF UNEXPECTED X-RAY FINDINGS

RIGHT P	AGE	09	010	CHOSP	CORPSI	TASK	BOOKLET
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RIGHT PAGE	09 OTO (HOSP CORPS) TASK BOOKLET
	ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 09 OF RESPONSE BOOKLET
26	GIVE/RECEIVE VERBAL REPORTS ABOUT PATIENT
27	ICARRY OUT DOCTOR'S VERBAL CROERS
28	CONSULT DOCTOR OR NURSE TO OBTAIN INFORMATION/ADVICE ON PATIENT CARE
29	REVIEW DOCTOR'S ORDERS AND INSTRUCTIONS WITH DOCTOR
30	OBTAIN CLARIFICATION OF CONFLICTING DOCTOR'S ORDERS
31	I IENSURE THAT DOCTOR'S ORDERS ARE CARRIED DUT
	I MAKE SUGGESTION REGARDING PATIENT CARE, E.G. NEED OF MEDICATION, TREATMENT
33	MODIFY/CHANGE PATIENT TREATMENT PLAN
34	 MAKE SUGGESTION REGARDING NEED FOR DIAGNOSTIC TESTS
35	! INITIATE AND ORDER DIAGNOSTIC TEST
	 REVIEW TEST/EXAMINATION/CONSULTATION REPORTS FOR ABNORMAL (POSITIVE) FINDINGS
	PLAN/MODIFY DIAGNOSTIC PROCEDURES ACCORDING TO PATIENT'S RESPONSE/NEED
	ARRANGE FURNITURE/SET UP EQUIPMENT/SUPPLIES FOR PROCEDURE, E.G. EXAM, TREATMENT
	CONFER WITH CORPSMAN TO DISCUSS PATIENT TREATMENT/PROGRESS/
	CONDUCT TEAM/WARD CONFERENCE (CLASS) ON PROBLEM/PROGRESS OF INDIVIDUAL PATIENT
	RECOMMEND PATIENT'S TRANSFER ACCORDING TO NEED/READINESS, E.G. FROM R.R., TO DELIVERY ROOM
	GIVE TRANSFER REPORT TO WARD OR RECEIVING UNIT ON PATIENT'S CONDITION, TREATMENT AND CARE PLAN
43	I INOTIFY MEDICAL PERSONNEL OF TREATMENT NEEDS FOR PATIENT !
44	 VERIFY/UPDATE PATIENT'S DIAGNOSIS IN RECORD/CARDEX
	VERIFY COMPLETENESS OF DOCTOR'S ORDERS, E.G. FOR ALL ROUTINE ADMISSION OR PRE-OP ORDERS
	VERIFY THAT DOCTOR'S ORDERS ARE UP-TO-DATE, E.G. TREATMENT, MEDICATION, DIET
47	MAKE ENTRIES ON DOCTOR'S PROGRESS NOTES
48	WRITE NURSING NOTES
49	 WRITE ORDERS IN PATIENT'S CHART FOR DOCTOR'S COUNTERSIGNATURE
	 DETERMINE PRIDRITIES FOR TREATMENT OF PATIENTS
•	TURN PAGE

LEFT PAGE L	DO DIO (HOSP CORPS) TASK BOOKLET
	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 10 OF RESPONSE BOOKLET
l	REVIEW PAST AND PRESENT MEDICAL/DENTAL HISTORY TO PLAN CARE
2 I	CLEAN/DISINFECT O.R. ROOM AFTER LAST CASE OF THE DAY
3 I	CLEAN/DISINFECT O.R. FLOORS/FURNITURE AFTER EACH CASE
4 I	SET UP O.R. ROOM FOR SEPTIC CASE
5 5	CLEAN/DISINFECT O.R. ROOM AFTER SEPTIC CASE
6	 CHANGE LINENS, E.G. BED, EXAM TABLES, BEDSIDE CURTAIN
7	REVIEW AND EVALUATE ASEPTIC TECHNIQUES
8	REVIEW AND EVALUATE BACTERIAL DECONTAMINATION PROCEDURES
	WRITE STANDARD INSTRUCTIONS FOR PATIENT CONCERNING EXAMINATIONS/ THERAPY OR PROCEDURES
10	ESTABLISH SURGERY SCHEDULE
	I INSPECT FOR AVAILABILITY AND USE OF SAFETY EQUIPMENT IN IMAZARDOUS AREAS
	INSPECT FOR USE OF PROTECTIVE CLOTHING IN OCCUPATIONALLY IMAZARODUS AREAS
• • •	 SPECIFY CLOTHING REQUIRED FOR PROTECTION FROM EQUIPMENT AND ENVIRONMENTAL HAZARDS
14	 ENFORCE ACCIDENT PREVENTION MEASURES
15	I ICHECK COMPRESSED GAS TANKS FOR LEAK, E.G. DXYGEN I
16	I ICHECK EQUIPMENT FOR ELECTRICAL HAZARDS AND GROUNDS
17	 CHECK LEVEL OF STATIC ELECTRICITY (CONDUCTIVITY)
	 CHECK LEVEL OF STATIC ELECTRICITY (CONDUCTIVITY) OF O.R. EQUIPMENT
19	I IDD PERIODIC MECHANICAL SAFETY CHECKS ON POWER OPERATED EQUIPMENT I
20	 CHECK INSTRUMENTS AND SUPPLIES FOR STERILIZATION INDICATORS
21	 DISPOSE OF SUPPLIES/INSTRUMENTS/EQUIPMENT AFTER TIME LIMIT/ EXPIRATION DATE
22	I ATTACH IDENTIFYING TAG TO COMPONENTS/EQUIPMENT !
23	I INSPECT THAT SUPPLIES/MATERIALS/EQUIPMENT ARE STORED PROPERLY
24	I IINSPECT SUPPLIES/EQUIPMENT FOR ACCEPTABILITY/DAMAGE/LOSS/ PILFERAGE
25	SESTABLISH SUPPLY USAGE RATE

RIGHT PAGE	O OTO (HOSP CORPS) TASK BOOKLET
	ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 10 OF RESPONSE BOOKLET
26	MAINTAIN STOCK OF STERILE SUPPLIES
27	MAINTAIN UNIT/WARD/SECTION FIRST AID AND EMERGENCY EQUIPMENT
28	MAINTAIN STOCK OF CHEMICAL SOLUTIONS
29	MAINTAIN STOCK OF SUPPLIES/MATERIALS/SPARE PARTS FOR UNIT
30	MAINTAIN STOCK OF EXCESS EQUIPMENT
31	STORE SUPPLIES
32	STORE INSTRUMENTS
33	UNPACK EQUIPMENT
34	MAKE UP STERILE TRAYS
35	MAKE SPECIAL SURGICAL SPONGES
36	COUNT SPONGES FOR O.R. PACKS
37	SELECT/SET UP STANDARD INSTRUMENT TRAYS FOR SCHEDULED SURGERY
38	SELECT/SET UP INSTRUMENTS FOR SPECIAL SURGICAL PROCEDURE
39	SELECT/SET UP INSTRUMENTS FOR SMALL PACKS
. 40	ASSEMBLE/SELECT NEEDLES FOR NEEDLE BOOK
41	PREPARE AND STERILIZE LINEN
42	PREPARE RUBBER GOODS FOR STERILIZATION
43	PREPARE SOLUTION BOTTLES FOR STERILIZATION AND STORAGE
44	PACKAGE (WRAP/DATE/LABEL) STERILE SUPPLIES 1 1
45	REPLENISH OPERATING ROOM WITH SUPPLIES 1 1
46	VER1FY/SIGN OFF ON REQUISITIONS/RECEIPTS FOR SUPPLIES/EQUIPMENT/
47	VERIFY AND CO-SIGN INVENTORY
48	IDD SUPPLY/EQUIPMENT INVENTORY
49	ROTATE INVENTORY
50	WASH GLASSWARE/INSTRUMENTS

TURN PAGE

	·
LEFT PAGE	LL OTO (HOSP CORPS) TASK BOOKLET
	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 11 OF RESPONSE BOOKLET
1	MAINTAIN/ACCOUNT FOR BULK ALCOHOL
2	PREPARE NORMAL SALINE SOLUTION
3	PREPARE DISTILLED WATER
4	PREPARE TISSUE BOTTLES
5	 DISINFECT INSTRUMENTS/MATERIALS/EQUIPMENT
6	DETERMINE METHOD OF STERILIZATION FOR INSTRUMENTS/EQUIPMENT
· ·	 DETERMINE/SELECT AGENTS/PROCESSES FOR EQUIPMENT/INSTRUMENT STERILIZATION
8	STERILIZE NEEDLES
9	 TEST AUTOCLAVE EFFECTIVENESS WITH CULTURE STRIPS
10	 BREA< DOWN SURGICAL INSTRUMENTS FOR POST OPERATIVE CLEANING
11	 FILE COMPLETED/RETURNED CHITS/REPORTS IN PATIENT RECORD
12	LOG X-RAY NUMBERS OR IDENTIFICATION ON TO RECORDS
13	PREPARE X-RAY REPORTS FOR PHYSICIAN TO COMPLETE
14	ASSEMBLE PATIENT RECORDS FOR REVIEW BY DOCTOR
15	LOG STD 519-A RADIOGRAPHIC REPORT
16	PREPARE RADIOGRAPHS FOR VIEWING BY DOCTOR
	CHECK CONSULTATION REQUESTS TO INSURE THE CORRECT STUDY IS TO BE
18	INFORM DOCTOR OF ANY CONTRAINDICATIONS TO STUDY
19	REVIEW AND FOLLOW THROUGH ON COMPLETED CONSULT REPORTS
-	SCHEDULE APPOINTMENTS FOR CLINIC/DEPARTMENT, E.G., MAINTAIN APPOINTMENT BOOK
21	ASSEMBLE CHART, REQUISITIONS FOR PHYSICAL EXAMINATION
	MAINTAIN DAILY RECORDS ON PATIENT PROCEDURES/EXAMINATIONS PERFORMED
23	ASSIGN WORK TO PATIENTS
24	ARRANGE TRANSPORTATION FOR PATIENTS/PERSONNEL
25	ARRANGE FOR SPECIAL OR LATE MEALS FOR PATIENTS/VISITOR/STAFF

RIGHT PAGE	11 OTO (HOSP CORPS) TASK BOOKLET
	ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 11 OF RESPONSE BOOKLET
26	MAINTAIN PATIENT REGISTER
	PREPARE REPORT/FEEDER REPORT ON NUMBERS OF INPATIENT/OUTPATIENT SERVICES PERFORMED
28	PICK UP PATIENTS DOCUMENTS FROM FILE
29	OBTAIN CONSENTS FOR PROCEDURES/AUTOPSY .
30	ASSIGN PERSONNEL TO DUTIES/WORK ACCORDING TO SCHEDULE
31	I ASSIGN SPACE FOR EQUIPMENT AND SUPPLIES !
32	 ARRANGE FOR BRIEFINGS
33	 CALCULATE LAB/DIAGNOSTIC TEST RESULTS
	 COORDINATE WITH OTHER SECTIONS FOR ASSISTANCE IN FABRICATING EQUIPMENT
	LOG CHANGES/DELETIONS OF OPERATING PROCEDURES ON SLATE IN
36	MAINTAIN TECHNIQUE CHARTS
37	
38	! MAINTAIN DUTY/CALL/EMERGENCY RECALL ROSTER
39	 MAINTAIN A SET OF REFERENCE BOOKS/MANUALS/PUBLICATIONS
40	 ESTABLISH/MAINTAIN SUTURE/INSTRUMENT TRAY CARDS
41	I IMAINTAIN CALL LIST TO FILL BROKEN/CANCELLED APPOINTMENTS I
42	! !MAINTAIN ATTENDANCE RECORDS !
43	
	 PREPARE PAPERHORK FOR RETURN OF DAMAGED MATERIALS/SUPPLIES/ EQUIPMENT
45	 PREPARE WORK ORDERS/WORK REQUESTS
46	 RELIEVE OTHERS FOR LUNCH/COFFEE BREAKS
47	
48	 ORDER SUPPLIES/EQUIPMENT THROUGH FEDERAL SUPPLY SYSTEM
49	 PREPARE REQUEST FORM FOR PHOTOGRAPHIC/PRINTING SERVICES
50	
	TIMM BASE

TURN PAGE

LEFT PAGE 1	2 OTO (HOSP CORPS) TASK BOOKLET
	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 12 OF RESPONSE BOOKLET
1 1	MAINTAIN INSTRUMENT CALIBRATION FILES
2	MAINTAIN LOG OF QUALITY CONTROL PROCEDURES
3	CHECK/LOCATE/IDENTIFY PART NUMBERS FROM CATALOGUES/MANUALS
4	RESEARCH LOCAL MEDICAL/DENTAL SUPPLY PURCHASE RATES
5	LOG RUNNING EXPENSES/EXPENDITURE OF MONIES
6	LOG PLANT PROPERTY IDENTIFICATION NUMBER AND CONDITION
7	LOG LOCAL PURCHASE INFORMATION
	MAINTAIN LEDGER OF SUPPLY/STOCK, E.G., REQUISITIONS, COST ACCOUNTING
9	MAKE LOCAL (OPEN) PURCHASE OF SUPPLIES
10	PREPARE REQUISITIONS FOR SUPPLIES/EQUIPMENT
	REQUISITION TRAINING AIDS FROM OTHER HOSPITALS/CLINICS OR CIVILIAN/GOVERNMENT HEALTH FACILITIES
12	LOG SPECIMENS RECEIVED
13	 LOG IN PATIENTS TO CLINIC/DEPARTMENT/SICK CALL
14	I DETERMINE ADEQUACY OF STERILIZATION PROCEDURES
15	I DEVELOP IMPROVED WORK METHODS AND PROCEDURES I
16	ASSESS COMPLETENESS OF LABORATORY REPORTS
17	 DETERMINE EQUIPMENT/SUPPLIES FOR EMERGENCIES/EXERCISES
18	DETERMINE IF REPAIR IS WITHIN UNIT CAPABILITIES
	I IRESEARCH MATERIAL FOR PROJECTS, I.E. COMPILE STATISTICS, GATHER IDATA FROM DIFFERENT SOURCES
20	SUPERVISE ROUTINE EQUIPMENT MAINTENANCE FOR SECTION/UNIT
21	ARRANGE FOR REPLACEMENT/REPAIR OF EQUIPMENT AS REQUIRED
22	 CONFER/VISIT MANUFACTURERS/CONTRACTORS TO OBTAIN FIRST HAND KNOWLEDGE OF EQUIPMENT/SUPPLIES
23	CONSULT ON CENTRAL/LOCAL SUPPLY PROBLEMS/PROCEDURES
24	ICOORDINATE ON EQUIPMENT LOANS, BORROWING OF MEDICAL/DENTAL SUPPLIES/TRAINING AIDS
25	COORDINATE WITH MANUFACTURERS/CONTRACTORS FOR EQUIPMENT REPAIR/

RIGHT PAGE	12 OTO (HOSP CORPS) TASK BOCKLET
I TASK NO.	I ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 12 I OF RESPONSE BOOKLET
26	INEGOTIATE WITH VENDORS, F.G. COST, DELIVERY SCHEDULE
27	 SCHEDULE LECTURES
28	1 IDESIGN TRAINING AIDS, ILLUSTRATIONS, GRAPHICS 1
29	I ISELECT CLINICAL MATERIAL FOR INSTRUCTIONAL PURPOSES, E.G. IPATIENTS, CASE STUDIES
30	 EVALUATE/SELECT AUDIOVISUAL MATERIALS.E.G. FILMS
31	I CONDUCT SEMINARS
32	PLAN CONFERENCES FOR STUDENTS DURING PRACTICAL TRAINING
33	I ITEACH FORMAL CLASSES
34	I PADMINISTER EXAMINATIONS
35	COMPUTE TEST GRADES
36	DEMONSTRATE CLINICAL PROCEDURES USING PATIENT/SUBJECT
37	SELECT WORK EXPERIENCES FOR STUDENT/TRAINEE
38	 EVALUATE STUDENTS PERFORMANCE/PROGRESS
39	COORDINATE WITH SUPERVISORS/INSTRUCTORS ON STUDENT TRAINING
40	 OPERATE/CONTROL EQUIPMENT FOR EXPERIMENTAL TESTS

Part II B LIST OF INSTRUMENTS AND EQUIPMENT

LE-T PAGE I	IN JEO CHUSE CORPS) TASK BOOKLET	
	1 FATER RESPONSES TO STATEMENTS BELOW IN LIFT SIDE 1 OF RESPONSE BOOKLET	F PA (t 13
1	1 STETHOSC02+	
2	1 TELECTRIC THERMOMETER, E.G. (VAC, K-PROGE 1	
3	! !THERM(IMETER, CLINICAL !	
4	1 TORESSINGS (TRAY, CART, DRAWER) 1	
5	I IFIRST AID KIT I	
6	! !EMERGENCY DRUG SUPPLY (KIT, BOX, DRAWER)	
7	Î ÎAMBU BAG (HOPE BAG) Î	-
8	I IRESPIRATOR BIRD	-
9	INHALATOR-ASPIRATOR (RESUSCITATOR) 	
10	I IGURNEY CARTS	
11	I WHEEL CHAIR	
12	I IENDOTRACHEAL TUBE	
13	ITRACHEOTOMY DILATOR	
14	TRACH TUBES, PLASTIC WITH CUFF (PORTEX)	•
15	TRAY, TRACHEOTOMY	
16	TRACHEOTOMY CARE TRAY	
17	TRAY, ENDOTRACHEAL	•
18		
19	TRAY, IRRIGATION EAR	
20	TRAY, INCISION DRAINAGE	•
21	SET, MINOR SURGICAL	1
22	I VACUTAINER BLOOD COLLECTING SYSTEM	
23	SYRINGE/NEEDLES	·
24	PARACENTESIS TRAY	
25 .	I DERMATOME	
	!	

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RIGHT PAGE	13 OTO (HOSP CORPS) TASK BOOKLET
	I ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 13. 1 OF RESPONSE BOOKLET
56	I NPH THAL MOSCOPE
21	I ILIGHT INTENSITY METER I
2.8	
29	AUDIOMETER, AUTOMATIC
30	1 LARYNGOSCOPE/ACCESSORIES
31	MIRROR LARYNGEAL
32	SALIVARY DUCT DILATOR
33	IFACIAL NERVE STIMULATOR, E.G., HELGER
34	POST NASAL BALCON, E.G., FOX
35	MICROLARYNGEAL INSTRUMENTS
36	IANTRAL PUNCTURE TRAY
37	TOTOSCOPE
38	ISPECULUM, EAR
39	SPECULUM, NASAL 1
40	INASAL BLEEDER TRAV I I
41	SINUS WASHING SET
42	IT & A BLEEDER TRAY !
43	INASAL FRACTURE SET I
44	INOSE PREP SET I
45	TEAR PREP SET
46	FELECTRONYSTAGNOGRAPH MACHINE
47	FIBEROPTIC ENDOSCOPY EQUIPMENT I
48	FOROBLIQUE PAN-ENDOSCOPE
49	OBSERVATION AND OPERATING TELESCOPE
50	SUCTION MACHINE, WAGENSTEIN

LEFT PAGE	14 OTO (HUSE CORES) TASK BOCKLET
	I ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE L+ TOP RESPONSE BUNKLET
1	EMERSON SUCTION MACHINE
5	SUSTION MACHINE, WALL UNIT
3	TRAY, ANAESTHETIC, LOGAL
4	TRAY, ANAESTHETIC PREPARATION
5	TRAY, ANAESTHETIC REGIONAL
6	SURGICAL INSTRUMENT SHARPENER, ELECTRIC
7	INSTRUMENT TRAY, MAJOR SURGERY
8	INSTRUMENT TRAY, MINOR SURGERY
9	I INSTRUMENT TRAY, EMERGENCY TRACH SET I
10	INSTRUMENT TRAY, RADICAL NECK SURGERY
11	INSTRUMENT TPAY, MIDDLE EAR SET
12	I INSTRUMENT TRAY, SUBMUCOUS RESECTION
13	INSTRUMENT TRAY, ADULT TONSILLECTOMY
14	INSTRUMENT TRAY, TONSILLECTOMY/ADENOIDECTOMY
15	! INSTRUMENT TRAY, RHINOPLASTY
16	INSTRUMENT TRAY, MYRINGOTOMY
17	INSTRUMENT TRAY, MASTOID
18	CAUTERY APPARATUS
19	OPERATING MICROSCOPE, E.G. ZEISS, DIPLOSCOPE
20	TRAY, OPERATING ROOM PREP
21	IDRILL, MICRO SHEA
22	DRILL, JORDAN DAY
23	DRILL, AIR STRYKER
24	IORILL, BURR HOLES
25	SURGICAL NEEDLE DRIVER

END

DATE FILMED 7-80

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